en Maria de la fina després de servicio de la compaña de l								Application or Docket Number					
	PATENT APPLICATION FEE DETERMINATION RECOF												
Effective October 1, 2003								09/222655					
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALLENTITY		
TOTAL CLAIMS								ΓE	FÉE	 آ	RATE	FEE	
FOR .			NUMBER FILED		NUM	NUMBER EXTRA		FEE	 		BASIC FEE	 	
TOTAL CHARGEABLE CLAIMS										-JOH			
			minus 20=			•		9=		JOR	X\$18=	ļ	
INDEPENDENT CLAIMS			minus 3 =		<u> </u>)= 		OR	X86=		
MULTIPLE DEPENDENT CLAIM PRESENT							+14	5=		OR	+290=		
* If the difference in column 1 is less than zero, enter "0" in column 2							TOT	AL.	<u> </u>	4	TOTAL		
CLAIMS AS AMENDED - PART II] 0	OTHER	THAN	
9-29-05 (Column 1) (Column 2) (Column 3)							SMA	LL E	YTITA	OR	SMALL		
AMENDMENT A		CLAIMS		HIGH		PRESENT			ADDI-	1		ADDI-	
	D	AFTER AMENDMENT		PREVIO		EXTRA	RAT	١.	TIONAL _FEE		RATE	TIONAL FEE	
	Total	. 66	Minus	9	76	= /	X\$.9	≡ .		OR	X\$18=	. :	
	Independent	. 6	Minus	*** /	5	=	X43				X86=		
à	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDENT	CLAIM		7.40	-		OR	:		
							+145			OR	+290=		
							tot addit. F	_		OR	TOTAL ADDIT. FEE		
(Column 1) (Column 2) (Column 3)													
AMENDMENT'B		CLAIMS REMAINING		HIGHE	BER	PRESENT	RATE		ADDI- TIONAL		RATE	ADDI- TIONAL	
	E	AFTER AMENDMENT		PREVIO PAID F		EXTRA:	TIA!	\perp	FEE		TALE.	FEE	
	Total	*	Minus	** 9	76	=	X\$.9	=.		OR	X\$18=	. • .	
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<u> </u>	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM												
en e							+145:			OR	+290= TOTAL	i .i. 📜	
							ADDIT: FI			OR	DOTT. FEEL		
	(Column 1) (Column 2) (Column 3)									1 "			
3	\mathcal{D}^{r_1}	REMAINING		NUMB	ER	PRESENT	RATE		ADDI- TONAL		RATE"	ADDI-	
ENI	F	AFTER A' ENDMENT		PREVIO		EXTRA	MAIL		FEE		TAIL	FEE	
AMENDMENT	Total		Minus	44		=	X\$ 9=	İ	İ	OR	X\$18=		
MEI	Independent	•	Minus	***		=	X43=	1			X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+		OR-		4 141ULV11	
# 145= # 145= # 145= # 145= # 145= # 145=										OR	+290=	· ·	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **ADDIT. FEE ***TOTAL **									<u>.</u>	OR A	DOTAL DOTT. FEE		
		moer Previously Pai iber Previously Pai					found in the	Report	opriate box	in colu	mn 1.		
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